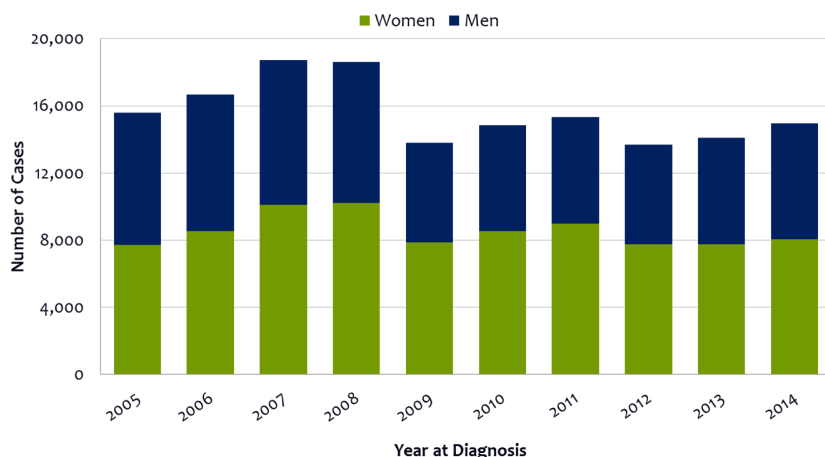


Gonorrhea Infections in North Carolina

Reported Gonorrhea Case Data, 2014

Reported gonorrhea infections have remained stable over the past few years

Newly Diagnosed Gonorrhea Infections by Gender, 2005-2014



In 2014:

- 14,952 gonorrhea infections were reported in North Carolina.
- North Carolina gonorrhea rates are higher than the national rates, similar to many states in the Southeast (143 vs. 106 per 100,000 population; CDC 2013).

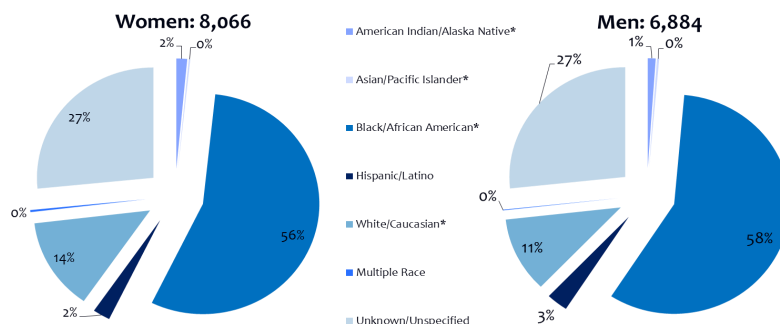
Disparity by race/ethnicity is particularly large for gonorrhea

What YOU can do

Provide cultural competency training for your staff and colleagues.

Resources in side bar.

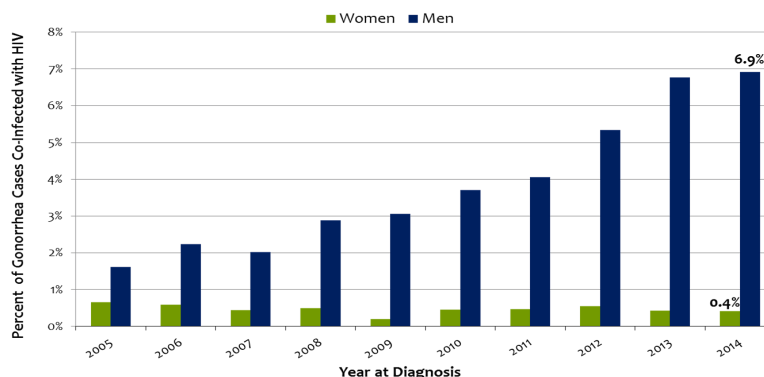
Gonorrhea Infections by Race/Ethnicity, 2014



Co-infection with HIV (diagnosed prior to or within 30 days of gonorrhea infection) has doubled among men in the past few years

Gonorrhea and HIV Co-infection by Gender, 2005-2014

- The percentage of men who are co-infected with gonorrhea and HIV has been increasing since 2007.
- The percentage of co-infected women remains stable and fairly low.



Want More Information?

HIV/STD Facts and Figures website:

<http://epi.publichealth.nc.gov/cd/stds/figures.html>

Centers for Disease Control and Prevention (CDC) Fact Sheet on Gonorrhea:

<http://www.cdc.gov/std/gonorrhea/stdfact-gonorrhea.htm>

Cultural Competency (C3) Trainings and Information on Care and Prevention in the United States (CAPUS) in North Carolina web site:

<http://www.med.unc.edu/ncaidstraining/capus>

Contact Us

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11/16/2015

Gonorrhea Infections in North Carolina

Reported Gonorrhea Case Data, 2014

What is North Carolina doing to decrease gonorrhea infections?

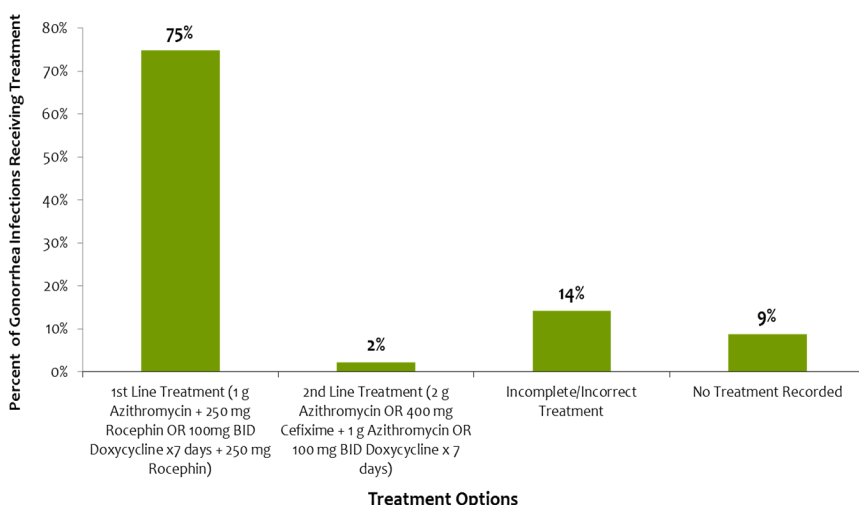
- In September 2014, the SLPH increased the age cut off for routine gonorrhea screening in women from ≤ 24 years of age to ≤ 25 years of age.
- North Carolina provides funds for gonorrhea screening for all women who are seen in a publically funded health care facility, such as local health departments and family planning settings.
- Two counties in North Carolina are participating in a pilot project to offer partner services to men who report sex with men (MSM) and men with HIV who are diagnosed with gonorrhea.
- The Department of Public Health is moving toward providing testing for gonorrhea at extragenital (rectal and oropharyngeal) sites for men reporting sex with men (MSM) and transgendered people.

What CLINICIANS can do

- Routinely ask patients about their sexual activity and test those that are sexually active
- Provide treatment consistent with the CDC guidelines (link in side bar)
- Refer partners for evaluation and treatment
- Report cases to the local health department

In 2014, 75% of all gonorrhea infections were treated correctly in North Carolina

North Carolina Gonorrhea Infection Treatments in 2014



What YOU can do

If you have a gonorrhea infection, ensure that you and your partners get treatment. Untreated gonorrhea can lead to severe health outcomes, including increased risk for HIV and pelvic inflammatory disease (PID).

- Correctly treating gonorrhea is very important, particularly because of the rise of drug resistance.
- In 2016, the North Carolina Division of Public Health Technical Assistance and Training Program (TATP) nurses will support county work to improve adherence to treatment guidelines and ensure the correct treatments are being delivered.

Recommendations from the CDC 2015 STD Treatment Guidelines:

Dual Therapy for Uncomplicated Gonococcal Infections

Recommended Regimens:

- Ceftriaxone (250 mg IM in a single dose) **PLUS**
- Azithromycin (1 g orally in a single dose).

Alternative Regimens (where ceftriaxone is not available):

- Cefixime (400 mg orally in a single dose) **PLUS**
- Azithromycin (1 g orally in a single dose). **OR**
- Gentamicin (240 mg IM one dose) **PLUS**
- Azithromycin (2 g orally in a single dose).

Data Source:

North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of July 6, 2015).

State of North Carolina • Pat McCrory, Governor
Department of Health and Human Services • Richard O. Brajer, Secretary
Division of Public Health • Megan Davies, M.D., Acting State Health Director
HIV/STD Surveillance Unit
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11/16/2015